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TRANSMITTAL FORM

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	09/966,036
		Filing Date	September 28, 2001
		First Named Inventor	Dorrie M. Happ
		Group Art Unit	1618
		Examiner Name	Blessing M. Fubara
Total Number of Pages in This Submission	14	Attorney Docket Number	50623.132

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Deposit Account 07-1850 Authorization <input checked="" type="checkbox"/> Postage Paid Return Postcard <input checked="" type="checkbox"/> Amendment and Response to Office Action (10 pages) <div style="padding-left: 20px;"><input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)</div> <input type="checkbox"/> Petition for Extension of Time (month) (1 page) (in duplicate) <input type="checkbox"/> Information Disclosure Statement with Form PTO-1449 citing References <input checked="" type="checkbox"/> Express Mail Label No. EV 889013058 US <input checked="" type="checkbox"/> Certificate of Mailing <input checked="" type="checkbox"/> Amendment Trans (1pg in duplicate)	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) Formal Sheets with Submission of Formal <input type="checkbox"/> Issue Fee Transmittal with PTO-85b (in duplicate) <input type="checkbox"/> Request for Continued Examination Transmittal (RCE) <input type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer (page) <input type="checkbox"/> Statement of Common Ownership <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Request for Status of Application <input type="checkbox"/> Other Enclosure(s) (please identify below):	
		Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Squire, Sanders & Dempsey L.L.P. Angie M. Augustus, Reg No.: 51,421
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Date	December 22, 2006

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